

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571) 273-2885**

Or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Block 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.


CURRENT CORRESPONDENCE ADDRESS (note: Legibly mark-up with any corrections or use Block 1)

**ORRICK, HERRINGTON & SUTCLIFFE, LLP
IP PROSECUTION DEPARTMENT
4 PARK PLAZA
SUITE 1600
IRVINE, CA 92614-2558**

Note: A certificate of mailing can only be used for domestic mailing of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawings, must have its own certificate of mailing or transmission.

Certificate of Transmission

I hereby certify that this Fee(s) Transmittal is being filed via EFS-WEB, Mail Stop ISSUE FEE or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Sharon B. Leachman	(E-Filer's printed name)
	(signature)
October 26, 2009	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/693,833	10/24/2003	Marcel Limousin	8707-2165	1007

TITLE OF INVENTION: **MANAGEMENT OF RESPIRATORY PAUSES OF HYPOPNEA IN AN ACTIVE IMPLANTABLE MEDICAL DEVICE OF THE CARDIAC PACEMAKER, DEFIBRILLATOR, CARIOVERTOR OR MULTISITE DEVICE TYPE**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DUE DATE
Nonprovisional	NO	\$1510	\$300	\$1810	12/10/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
ALTER, ALYSSA MARGO	3762	607-042000

1. Change of Correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of Customer Number is required.**

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. _____
2. **Orrick Herrington & Sutcliffe, LLP**
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ELA MEDICAL S.A.S.

(B) ADDRESS:

98, rue Maurice-Arnoux, F-92120 Montrouge, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☐ Advance Order - # of Copies

4b. Payment of Fee(s)

- ☐ A check in the amount of the fee(s) is enclosed
- ☐ Payment by credit card. Form PTO-2038 is attached
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0665 (enclose an extra copy of this form).

5. Change of Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. ☐ Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the application; a registered attorney or agent; or the assignee or other party in interest as shown by records of the United States Patent and Trademark Office.

Authorized Signature /Robert M. Isackson/ Date October 26, 2009

Typed or Printed name Robert M. Isackson Registration No. 31,110

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is the file (and by the USPTO to process) as application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.